Revised 06/05

## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD IA ETHICS AND FORM-GBG 510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 50319 IA ETHICS AND FORM-GBG I

Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

| ont, Bould Barant information received by a department or accepted by the Governor on behalf |  |  |  |  |
|--|--|--|--|--|
| For office use only  |  |  |  |  |
| Audited  |  |  |  |  |
| Checked  |  |  |  |  |
| Computer   |  |  |  |  |
| <u> </u>   |  |  |  |  |

| State Training School  |                          |  |  |  |  |
|--|--------------------------|--|--|--|--|
| State Training School Name of Department or Office                           |                          | Mar  | ·····  |  |  |
|  | Eldora, I.A., 50627      |  |  |  |  |
| Mailing Address 641-858 5402   | City, State, Zip Code    |  |  |  |  |
| Area Code & Telephone No.  |                          |  | The second secon |  |  |
| CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI                              | CE.                      |  |  |  |  |
| SOUTH OF ENGLISH OF THE OF OFFI  | CE.                      |  |  |  |  |
| Millie Dagit   |                          |  |  |  |  |
| Name 3211 Edgington Ave.   | Fldo                     | Eldora, IA. 50627  |  |  |  |
| Mailing Address (If different from above)                                    |                          | City, State, Zip (if different from above)   |  |  |  |
| mdagit@das state ia.us   | - 3,,                    |  |  |  |  |
| Email Address  | Area Code &              | Telephone Number (   | (if different from above)  |  |  |
|  |                          | a stage of the sta |  |  |  |
| ONOR OF GIFT, BEQUEST, OR GRANT:   |                          |  |  |  |  |
| Friends of Pine Lake   |                          |  |  |  |  |
| Name   |                          |  |  |  |  |
| 714 6th Street Eldora, Iowa 50627  |                          |  |  |  |  |
| Mailing Address City, State, Zip Code  | 4/3/2008                 | )  | s 500.00   |  |  |
| Only, State, 2p Obde   | <b> </b>                 |  |  |  |  |
| Ann Code 9 Tologham Nation   | Date of Gift, B          | Bequest, or Grant  | Amount/Value*  |  |  |
| Area Code & Telephone Number   | *value is defin          | ned as "fair market va   | llue" of item as determined by   |  |  |
|  | receiving dep            | artment or office. If n  | no value mark "0.00".  |  |  |
| Email Address (optional)   |                          |  |  |  |  |
|  |                          |  |  |  |  |
| Provide a description of the gift, bequest, or grant and purpose thereof:    |                          |  |  |  |  |
| Purchase trees etc for the campus  |                          |  |  |  |  |
|  |                          |  |  |  |  |
|  |                          |  |  |  |  |
| Criteria to use this form:   |                          |  |  |  |  |
| Receipt of any gift, bequest, or grant that is received by any department    | of the state or receive  | d by the Covernor on   | habalf of the state  |  |  |
| the state of any gain, bodaest, or grain that is toosived by any departition | ur the state of received | a by the Governor on   | behall of the state.   |  |  |
| 그 경기에 있는 사람들 보내 기를 되는 것이다.   |                          |  |  |  |  |
|  |                          |  |  |  |  |
| atement of Affirmation:  |                          |  |  |  |  |
|  |                          |  |  |  |  |
| affirm that the gift, bequest, or grant reporte                              | ed above is accurate. I  | further affirm that the  | e information concerning the   |  |  |
| nor and assessment of the fair market value (if applicable) is correct and   | true to the best of my l | nowledge.  |  |  |  |
|  |                          |  |  |  |  |
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